



United States Department of Agriculture  
Natural Resources Conservation Service

## CSP Enhancement Certification Sheet

### Pesticide Management

I have elected to use the following enhancements and understand the requirements of the selected activities:

- ☐ Utilize a high level Integrated Pest Management System with pesticides applies only as a last resort for managing pests and for reducing environmental risk.

**Or**

I have elected to use two or more of the following Water and Air Quality – Pesticide Risk Mitigation Activities and understand the requirements of the selected activities (Check at least two applicable activities):

NOTE: I understand that the two activities selected for this enhancement payment must be in addition to or over and above activities documented in the A) Soil and Water Eligibility Tool or B) Grazing Lands Eligibility Tool.

- ☐ Maintain windbreaks where pesticides are applied to reduce and/or intercept spray drift
- ☐ Use precision pesticide application technology to reduce spray drift and the total amount of pesticide applied. This can include any of the following:
  - 1. Precision guidance systems that reduce ground or aerial spray overlap to less than 12 inches
  - 2. Computer guided application systems that integrate real time meteorological data and computer model guidance to reduce pesticide drift from aerial application
- ☐ Use GPS data loggers that document site-specific compliance with all label requirements for drift mitigation
- ☐ Use chemical adjuvants proven to reduce pesticide drift
- ☐ Use GPS based technology to map and monitor weed locations
- ☐ Use targeted grazing as a tool to manage and control undesirable plants and not use pesticides
- ☐ Weed mapping to provide a framework for area-wide and site specific management plans



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### Participant Acknowledgement Statement:

I agree to apply this enhancement under the terms and conditions of my CSP contract and understand the requirements of the activity.

Compensation will be on a per acre basis as described in my CSP contact.

CTUs/Fields	Units Applied	Management Activity

### I agree that the following information will be provided to NRCS upon request:

1. Written documentation of the activity performed.
2. Copies of dated receipts for equipment or services purchased.

I understand that it is my responsibility to obtain all necessary permits and to comply with all laws, regulations and ordinances pertaining to the application of these activities.

Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_